



STATE OF CONNECTICUT

OFFICE OF POLICY AND MANAGEMENT

TESTIMONY PRESENTED TO THE PUBLIC HEALTH COMMITTEE
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Testimony Opposing Senate Bill No. 782

An Act Promoting the Use of Health Information Technology

Senator Harris, Representative Ritter and distinguished members of the Public Health Committee, thank you for the opportunity to offer written testimony on Senate Bill No. 782 - An Act Promoting the Use of Health Information Technology.

In signing P.L. 111-5, the American Recovery and Reinvestment Act of 2009, President Obama set forth a goal of having each citizen's health record be in electronic form by 2014. The federal stimulus bill creates an office of the National Coordinator whose responsibility is the development of a nationwide health information technology infrastructure that allows for the electronic use and exchange of an individual's health information. This system must be structured to address issues such as ensuring that each patient's health information is secure, improving health care quality, reducing medical errors, reducing health disparities, and providing for advances in the delivery of patient-centered medical care, and, perhaps most importantly, reducing health care costs resulting from inefficiency.

At this point, the exact amount of funds coming to Connecticut as a part of the federal stimulus legislation related to the electronic health record technology initiative is not clear. What is known is that, nationwide, \$2 billion is available to the Office of the National Coordinator for the effort. These funds are intended to be used for planning grants, implementation grants, and a loan program. As with many aspects of the stimulus bill, further guidance is anticipated from Washington on program initiative specifics.

A key provision in the federal legislation calls for the Secretary of Health and Human Services to make federal funds available to a State or to a "qualified State-designated entity." Either of these entities would be responsible for the receipt and disbursement of federal funds for the implementation of the electronic health record initiative. Section 2 of the bill before you designates eHealthConnecticut, a Connecticut based non-profit organization, which is composed of public and private partners, as the "qualified State-designated entity" - in other words, as the state-wide health information exchange network for the state. While eHealthConnecticut has been involved with health information technology issues for some time now, naming any particular entity in statute is problematic on a number of fronts. First, our position is that the State of Connecticut should be the entity receiving and managing any stimulus-related health information technology funding. We think the state is best suited to addressing important issues that have not as yet been addressed and which we feel an outside entity is ill-suited to address, including concerns about privacy, access to, use of and funding for electronic health records and health information technology. Second, even if we agreed that a non-state entity should be named as the "qualified State-designated entity," the entity so named should be selected through a fair, open and competitive process. None of my comments should be construed as calling into question eHealthConnecticut's expertise, abilities, or dedication. In fact, it is entirely appropriate that the state consider including and utilizing the expertise of eHealthConnecticut as the health information technology initiative moves forward. However, we do not think it is in the best interests of the taxpayers, businesses and institutions of the state to leave this initiative in non-state hands at this time.

I would like to again thank the committee for the opportunity to present this written testimony and, as always, my staff and I are available at your convenience to answer any questions you may have.